## Case 18-15509-jkf Doc 19 Filed 01/15/19 Entered 01/15/19 18:15:41 Desc Main Document Page 1 of 5

Fill	in this information t	o identify your ca	ase:							
Del	otor 1	Jameel Berr	ard Miles							
	otor 2 ouse, if filing)									
Uni	ted States Bankrup	tcy Court for the	EASTERN DISTRICT	OF PENNSYLVANIA						
Cas	se number 18-	15509				Ch	eck if this is	<u>.</u>		
(If kr	nown)						An amende	ed filing		
L									ng postpetition ollowing date:	
0	fficial Form	<u> 1061</u>					MM / DD/ Y	YYYY		
S	chedule I:	Your Inc	ome							12/15
atta	ch a separate shee	et to this form.	r spouse is not filing wi On the top of any addition				number (if	known). A		
		than one job		■ Employed			☐ Employed			
	If you have more than one job, attach a separate page with information about additional		Employment status*	☐ Not employed				mployed		
	employers.		Occupation	Realtor						
	Include part-time, self-employed wo		Employer's name	Weichert Realtor	s					
	Occupation may i or homemaker, if		Employer's address	McCarthy Assoc. 6901 Germantow		е				
			How long employed th	,		or Additi	onal Emplo	yment Inf	ormation	
Par		tails About Mor	•							
	mate monthly incouse unless you are		ate you file this form. If y	you have nothing to rep	oort for an	y line, w	rite \$0 in the	space. In	clude your no	n-filing
	ou or your non-filing e space, attach a se		ore than one employer, co this form.	ombine the information	for all emp	oloyers f	or that perso	on on the li	nes below. If	you need
						For D	ebtor 1		btor 2 or ing spouse	
2.			ry, and commissions (be calculate what the monthly		2.	\$	1,099.00	\$	N/A	=
3.	Estimate and list	t monthly overt	ime pay.		3. +	\$	0.00	+\$	N/A	<del>.</del>
4	Calculate gross	Income. Add lin	ne 2 + line 3		4	\$ <b>1</b>	ngg nn	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1	Jameel Bernard Miles	-	C	Case number (if known	) _	18-155	i09		
					For Debtor 1			ebtor		
	Cor	by line 4 here	4.		\$ 1,099.00	•	\$	iing s	pouse N/A	
		by line 4 fiere	•		1,000.00	_	<b>—</b>		11/7	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	۱.	\$ 206.00	)_	\$		N/A	<u>.</u>
	5b.	Mandatory contributions for retirement plans	5b	).	\$ 0.00	)	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c		\$ 0.00	)	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$ 0.00	_	\$		N/A	_
	5e.	Insurance	5e		\$ 0.00	_	\$		N/A	_
	5f.	Domestic support obligations Union dues	5f.		\$ 0.00 \$ 0.00		\$		N/A	_
	5g. 5h.	Other deductions. Specify:	5g 5h	j. 1.+	\$ 0.00 \$ 0.00	_			N/A N/A	_
^			_			_	· —			_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ 206.00	_	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 893.00	<u>)</u>	\$		N/A	<u>.</u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1.	\$ 700.00	<b>.</b>	\$		N/A	
	8b.	Interest and dividends	8b		\$ 0.00	_	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	<b>:</b> .	\$ 0.00		\$		N/A	_
	8d.	Unemployment compensation	8d		\$ 0.00	_	\$		N/A	
	8e.	Social Security	8e	<del>)</del> .	\$ 0.00		\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g		\$ 0.00 \$ 0.00	_	\$ \$		N/A N/A	
	8g. 8h.	Other monthly income. Specify: tax refund	oy 8h		\$ 150.00	_	· —		N/A N/A	_
	011.	tax returns	_ '''	···	Ψ	<u>,</u> .			IN/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	850.00	)	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	1,743.00 +	\$		N/A	= \$	1,743.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-	1,745.00	_		17/	-	1,7 40.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not excity:	depe		•			hedule 11.	_	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certaillies						12.	\$	1,743.00
13.	Do	you expect an increase or decrease within the year after you file this form	?						Combi month	ned ly income
		No.								
		Voc Evoloin:								

Case 18-15509-jkf Doc 19 Filed 01/15/19 Entered 01/15/19 18:15:41 Desc Main Document Page 3 of 5

Debtor 1	Jameel Bernard Miles	Case number (if known)	18-15509
----------	----------------------	------------------------	----------

## Official Form B 6l Attachment for Additional Employment Information

Debtor		
Occupation	Teacher	
Name of Employer	Kelly Services	
How long employed	1 year	
Address of Employer	•	

Official Form 106I Schedule I: Your Income page 3

Fill	in this information to identify your case:				
	Jameel Bernard Miles		Check	if this is:	
			_	amended filing	
	ouse, if filing)				ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: EASTERN DISTRICT OF PENNS	YLVANIA	N	MM / DD / YYYY	
1	se number				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people are bringing in the properties of the prop				
1.	Is this a joint case?				
	■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Househ	old of Debto	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		5	Yes
					□ No
					Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes				00
exp	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a suppolicable date.	ou are using this for lemental <i>Schedule</i> .	rm as a sup J, check the	pplement in a Cha box at the top o	pter 13 case to report f the form and fill in the
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on <i>Schedule I: Y</i> ficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		820.00
			·· •		
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	<ul><li>4b. Property, homeowner's, or renter's insurance</li><li>4c. Home maintenance, repair, and upkeep expenses</li></ul>		4b. \$ 4c. \$		0.00
	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as hor	me equity loans	5. \$		0.00

## Case 18-15509-jkf Doc 19 Filed 01/15/19 Entered 01/15/19 18:15:41 Desc Main Page 5 of 5 Document

Deb	tor 1 Jameel Bernard Miles Co	case num	ber (if known)	18-15509
<b>.</b>	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	60.00
	6b. Water, sewer, garbage collection	6b.	\$	40.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	152.00
	6d. Other. Specify:	6d.	\$	0.00
	Food and housekeeping supplies		\$	200.00
	Childcare and children's education costs	8.	\$	0.00
	Clothing, laundry, and dry cleaning	9.	\$	0.00
).	Personal care products and services	10.	\$	20.00
1.	Medical and dental expenses	11.	\$	0.00
2.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.			
	Do not include car payments.	12.		120.00
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
4.	Charitable contributions and religious donations	14.	\$	0.00
5.	Insurance.		-	
	Do not include insurance deducted from your pay or included in lines 4 or 20.		_	
	15a. Life insurance	15a.		0.00
	15b. Health insurance	15b.	·	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	\$	0.00
3.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		_	
_	Specify:	16.	\$	0.00
7.	Installment or lease payments:	47-	•	0.00
	17a. Car payments for Vehicle 1	17a.	*	0.00
	17b. Car payments for Vehicle 2	17b.		0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
3.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
9.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.	•	
).	Other real property expenses not included in lines 4 or 5 of this form or on Schedu	ule I: Yo	ur Income.	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
1.	Other: Specify:	21.	+\$	0.00
_		_		
2.	Calculate your monthly expenses		•	
	22a. Add lines 4 through 21.		\$	1,412.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,412.00
3.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,743.00
	23b. Copy your monthly expenses from line 22c above.	23b.	·	1,412.00
		_0		1,712.00
	23c. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	331.00

П	Nο

Explain here: Increase due to increase of hours for school district Yes.